

ISSUE SLIP STAPLE AREA (for additional cross references)

MB

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	PA	70385	
O.I.P.E. CLASSIFIER		8	1-28-99
FORMALITY REVIEW	DB	70014	2/3/99

# INDEX OF CLAIMS

✓ ..... Rejected                      N ..... Non-elected  
 = ..... Allowed                      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted                      O ..... Objected

BEST AVAILABLE COPY

Claim	Final	Original	Date
1	✓	✓	9/2/99
2	✓	✓	9/2/99
3	✓	✓	9/2/99
4	✓	✓	9/2/99
5	✓	✓	9/2/99
6	✓	✓	9/2/99
7	✓	✓	9/2/99
8	✓	✓	9/2/99
9	✓	✓	9/2/99
10	✓	✓	9/2/99
11	✓	✓	9/2/99
12	✓	✓	9/2/99
13	✓	✓	9/2/99
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45	✓	✓	9/2/99
46	✓	✓	9/2/99
47	✓	✓	9/2/99
48	✓	✓	9/2/99
49	✓	✓	9/2/99
50	✓	✓	9/2/99

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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